

Revision: HCFA-PM-95-4 (HSQB)  
JUNE 1995

Attachment 4.35-H

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: OREGON

## ELIGIBILITY CONDITIONS AND REQUIREMENTS

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Enforcement of Compliance for Nursing Facilities

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Additional Remedies: Describe the criteria (as required at §1919(h)(2)(A)) for applying the additional remedy. Include the enforcement category in which the remedy will be imposed (i.e., category 1, category 2, or category 3 as described at 42 CFR 488.408).

No additional remedies under federal requirements.

TN No. 95-15

Supersedes

TN No. —Approval Date: 2/13/96Effective Date: 10/1/95